2021 FOREIGN PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 813009

Entity Name: ANTHEM LIFE INSURANCE COMPANY

Current Principal Place of Business:

220 VIRGINIA AVENUE INDIANAPOLIS. IN 46204

Current Mailing Address:

220 VIRGINIA AVENUE INDIANAPOLIS. IN 46204 US

FEI Number: 35-0980405

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

INSURANCE COMMISSIONER 200 E. GAINES ST TALLAHASSEE, FL 32399-0000 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Officer/Director Detail :						
Title	TREASURER	Title	DIRECTOR			
Name	SCHER, VINCENT E	Name	STEINMEYER, HEATHER CHOCKLEY			
Address	220 VIRGINIA AVENUE	Address	233 S WACKER DRIVE			
City-State-Zip:	INDIANAPOLIS IN 46204		SUITE 3700			
,		Citv-State-Zip:	CHICAGO IL 60606			

City-State-Zip:	INDIANAPOLIS IN 46204	City-State-Zip:	CHICAGO IL 60606
Title Name Address City-State-Zip:	SECRETARY AND DIRECTOR KIEFER, KATHLEEN S 220 VIRGINIA AVENUE INDIANAPOLIS IN 46204	Title Name Address City-State-Zip:	DIRECTOR BENINTENDI, LAURIE HELM 4361 IRWIN SIMPSON ROAD MASON OH 45040
Title Name Address	DIRECTOR PENCZEK, RONALD WILLIAM 220 VIRGINIA AVENUE	Title Name	DIRECTOR, CHAIRPERSON AND PRESIDENT POULAKOS, GREGORY
City-State-Zip:	INDIANAPOLIS IN 46204	Address	3350 PEACHTREE ROAD POB 30302-445
Title	ASSISTANT TREASURER	City-State-Zip:	ATLANTA GA 30326
Name	NOBLE, ERIC (RICK) KENNETH	Title	ASSISTANT SECRETARY
Address	220 VIRGINIA AVENUE	Name	ANDREWS, KRISTAN JANE
City-State-Zip:	INDIANAPOLIS IN 46204	Address	220 VIRGINIA AVENUE

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: KATHLEEN S. KIEFER

SECRETARY

City-State-Zip: INDIANAPOLIS IN 46204

03/15/2021 Date

Electronic Signature of Signing Officer/Director Detail

Date